### IOWA ETHICS AND CAMPAIGN DISCLOSURE BOARD

THE SE STOR BISCLE TA DES MOINES, IA 50319 Fax: (515)281-4073 www.iowa.gov/ethics

Reset Form

lowa Code section 8.7 requires all gifts, bequests, and grants given to any department of the state of lowa or received by the Governor on behalf of the state be reported to the lowa Ethics and Campaign Disclosure Board and the Government Oversight Committee. The Board will provide a copy of this report to the Government Oversight Committee. This form is required to be filed within 20 days of receipt of the gift, bequest, or grant.

### FORM-GBG

Gift, Bequest, o	r Grant information
received by a d	epartment or
accepted by the	Governor on behalf
of the state	

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Iowa Medical & Classification Center	
Name of Department or Office	
PO Box A Mailing Address	Oakdlae, IA 52319
319-626-2391	City, State, Zip Code
Area Code & Telephone No.	
ONTACT PERSON FOR RECIPIENT DEPARTMENT OR O	FFICE:
Lowell Brandt	
Name	
Mailing Address (if different from above)	City, State, Zip (if different from above)
Email Address	
	Area Code & Telephone Number (if different from above)
ONOR OF GIFT, BEQUEST, OR GRANT:	
Private Donations	<del></del>
Varne	
Beverly Huffman - IMCC, PO Box Oakdale, IA 52319	
Aailing Address City, State, Zip Code	-
319-626-2391	March 2008 \$ 59.00
Area Code & Telephone Number	Date of Giff, Bequest, or Grant Amount/Value*
beverly.huffman@iowa.gov	"value is defined as "fair market value" of item as determined by
mail Address (optional)	receiving department or office. If no value mark "0.00".
Provide a description of the gift, bequest, or grant and purpose there	rof:
Books, DVD set for use by offenders in the price	son chanel and on units
of the pin	son enaper and on units.
Critoria to use this form.	
	ent of the state or received by the Governor on behalf of the state
Criteria to use this form: Receipt of any gift, bequest, or grant that is received by any departm	ent of the state or received by the Governor on behalf of the state.

#### Si

I, <u>Larry Brimeyer</u> affirm that the gift, bequest, or grant reported above is accurate. I further affirm that the information concerning the donor and assessment of the fair market value (if applicable) is correct and true to the best of my knowledge.

### 10WA ETHICS AND CAMPAIGN DISCLOSURE BOARD 510 EAST 12TH, SUITE 1A

DES MOINES, IA 50319 Fax: (515)281-4073 www.iowa.gov/ethics

Reset Form

lowa Code section 8.7 requires all gifts, bequests, and grants given to any department of the state of Iowa or received by the Governor on behalf of the state be reported to the Iowa Ethics and Campaign Disclosure Board and the Government Oversight Committee. The Board will provide a copy of this report to the Government Oversight Committee. This form is required to be filed within 20 days of receipt of the gift, bequest, or grant.

### FORM-GBG

Gift, Bequest, or Grant information received by a department or accepted by the Governor on behalf of the state

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DEPARTMENT OR OFFICE RECEIVING THE GIFT, BEQUEST,	OR GRANT:
Iowa Medical & Classification Center	
Name of Department or Office PO Box A	
Mailing Address	akdlae, JA 52319
Area Code & Telephone No.	ly, State, Zip Code
ONTACT PERSON FOR RECIPIENT DEPARTMENT OR OFFIC	E;
Lowell Brandt	
Name	
Mailing Address (if different from above)	City, State, Zip (if different from above)
Email Address	only, clote, 2th (ii dilletent from above)
	Area Code & Telephone Number (if different from above)
ONOR OF GIFT, BEQUEST, OR GRANT:	
Private Donations  Name  Beverly Huffman - IMCC, PO Box Oakdale, IA 52319  Mailing Address City, State, Zip Code  319-626-2391  Area Code & Telephone Number	March January 2008 \$ 150.00  Date of Girt, Bequest, or Grant Amount/Value*
beverly.huffman@iowa.gov mail Address (optional)	*value is defined as "fair market value" of item as determined by receiving department or office. If no value mark "0.00".
Provide a description of the gift, bequest, or grant and purpose thereof:	
Books for use by offenders in the prison chapel and	on units.
Criteria to use this form:	
Receipt of any gift, bequest, or grant that is received by any department of	the state or received by the Governor on behalf of the state.
tement of Affirmation:	

### St

1, Lorry Br. meyer effirm that the gift, bequest, or grant reported above is accurate. I further affirm that the information concerning the donor and assessment of the fair market value (if applicable) is correct and true to the best of my knowledge.

### IOWA ETHICS AND CAMPAIGN DISCLOSURE BOARD 510 EAST 12TH, SUITE 1A

DES MOINES, IA 50319 Fax: (515)281-4073 www.iowa.gov/ethics

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DEPARTMENT	OR OFFICE	RECEIVING	THE GIFT.	BEQUEST	ΛÞ	CDANT.
		VECENIAR	THE GIFT.	BEQUEST	ΛÞ	CDANT

Iowa Medical & Classification Center	r ·
PO Box A	Oakdlae, 1A 52319
Mailing Address 319-626-2391	City, State, Zip Code
Area Code & Telephone No.	
ONTACT PERSON FOR RECIPIENT DEPA	PTMENT OF OFFICE
Lowell Brandt	RIMENI OR OFFICE;
Name	
Malling Address (if different from above)	City, State, Zip (if different from above)
mail Address	
	Area Code & Telephone Number (if different from above)
ONOR OF GIFT, BEQUEST, OR GRANT:	
Kenneth Copeland Ministries  Beverly Huffman - IMCC, PO Box Oakdale  Bailing Address City, State,  319-626-2391  rea Code & Telephone Number  peverly.huffman@iowa.gov  mail Address (optional)  Provide a description of the gift, bequest, or grant a  Books for use by offenders in the	Zip Code  January 2008 \$ 864.00  Date of Gift, Bequest, or Grant Amount/Value*  *value is defined as "fair market value" of item as determined by receiving department or office. If no value mark "0.00".
riteria to use this form:	
leceipt of any gift, bequest, or grant that is received	d by any department of the state or received by the Governor on behalf of the state.

### St

I, <u>Larry Brimeyer</u> affirm that the gift, bequest, or grant reported above is accurate. I further affirm that the information concerning the donor and assessment of the fair market value (if applicable) is correct and true to the best of my knowledge.

# 10WA ETHICS AND CAMPAIGN DISCLOSURE BOARD 23 AH 10: 3510 EAST 12<sup>TH</sup>, SUITE 1A DES MOINES, IA 50319 Fax: (515)281-4073 Resi

www.iowa.gov/ethics

Reset Form

lowa Code section 8.7 requires all gifts, bequests, and grants given to any department of the state of lowa or received by the Governor on behalf of the state be reported to the Iowa Ethics and Campaign Disclosure Board and the Government Oversight Committee. The Board will provide a copy of this report to the Government Oversight Committee. This form is required to be filed within 20 days of receipt of the gift, bequest, or grant.

### FORM-GBG

Gift,	Bequest, or Grant information
rece	ived by a department or
acce	pted by the Governor on behal
of th	e state

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Name of Department or Office PD Box A Name Occ & Telephone No.  CONTACT PERSON FOR RECIPIENT DEPARTMENT OR OFFICE:  Lowell Brandt Name Mailing Address (if different from above)  City, State, Zip (if different from above)  Email Address Area Code & Telephone Number (if different from above)  ONOR OF GIFT, BEQUEST, OR GRANT:  Kenneth Copeland Ministries Name Beverly Huffman - IMCC, PO Box Oakdale, IA 52319 Mailing Address City, State, Zip Code 319-026-2391  January 2008 \$ 240.00  Date of Gift, Bequest, or Grant Amount/Value*  *Value is defined as "fair market value" of item as determined by receiving department or office. If no value mark "0.00".  Provide a description of the gift, bequest, or grant and purpose thereof: 24 Holy Bibles  Criteria to use this form:  Receipt of any gift, bequest, or grant that is received by any department of the state or received by the Governor on behalf of the state.	DEPARTMENT OR OFFICE RECEIVING THE GIFT, BEQUES	I, OR GRANT:
City, State, Zip Code Area Code & Telephone No.  CONTACT PERSON FOR RECIPIENT DEPARTMENT OR OFFICE:  Lowell Brandt Name  Mailing Address (if different from above)  City, State, Zip (if different from above)  Area Code & Telephone Number (if different from above)  ONOR OF GIFT, BEQUEST, OR GRANT:  Kenneth Copeland Ministries  Name  Beverly Huffman - IMCC, PO Box Oakdale, IA 52319  Mailing Address  City, State, Zip Code  January 2008 \$ 240.00  Date of Gift, Bequest, or Grant Amount/Value*  Value is defined as "fair market value" of item as determined by receiving department or office. If no value mark "0.00".  Provide a description of the gift, bequest, or grant and purpose thereof:  24 Holy Bibles  Citeria to use this form:  Receipt of any gift, bequest, or grant that is received by any department of the state or received by the Governor on behalf of the state.	Iowa Medical & Classification Center Name of Department or Office PO Box A	
Lowell Brandt Name  Mailing Address (if different from above)  Email Address  Area Code & Telephone Number (if different from above)  ONOR OF GIFT, BEQUEST, OR GRANT:  Kenneth Copeland Ministries Name  Beverly Huffman - IMCC, PO Box Oakdale, IA 52319  Mailing Address City, State, Zip Code  January 2008 \$ 240.00  Date of Gift, Bequest, or Grant Amount/Value*  value is defined as "fair market value" of item as determined by receiving department or office. If no value mark "0.00".  Provide a description of the gift, bequest, or grant and purpose thereof:  24 Holy Bibles  Criteria to use this form:  Receipt of any gift, bequest, or grant that is received by any department of the state or received by the Governor on behalf of the state.	319-626-2391	Oakdlae, IA 52319 City, State, Zip Code
Lowell Brandt Name  Mailing Address (if different from above)  Email Address  Area Code & Telephone Number (if different from above)  ONOR OF GIFT, BEQUEST, OR GRANT:  Kenneth Copeland Ministries Name  Beverly Huffman - IMCC, PO Box Oakdale, IA 52319  Gity, State, Zip Code  319-626-2391  Area Code & Telephone Number (if different from above)  January 2008  5 240.00  Date of Gift, Bequest, or Grant Amount/Value*  "value is defined as "fair market value" of item as determined by receiving department or office. If no value mark "0.00".  Provide a description of the gift, bequest, or grant and purpose thereof:  24 Holy Bibles  Criteria to use this form:  Receipt of any gift, bequest, or grant that is received by any department of the state or received by the Governor on behalf of the state.		
Name  Mailing Address (if different from above)  Email Address  Area Code & Telephone Number (if different from above)  ONOR OF GIFT, BEQUEST, OR GRANT:  Kenneth Copeland Ministries  Name  Beverly Huffman - IMCC, FO Box Oakdale, IA 52319  Mailing Address City, State, Zip Code  319-626-2391  Area Code & Telephone Number \$  January 2008 \$ 240.00  Date of Gift, Bequest, or Grant Amount/Value*  value is defined as "fair market value" of item as determined by receiving department or office. If no value mark "0.00".  Provide a description of the gift, bequest, or grant and purpose thereof:  24 Holy Bibles  City, State, Zip Code  January 2008 \$ 240.00  Date of Gift, Bequest, or Grant Amount/Value*  value is defined as "fair market value" of item as determined by receiving department or office. If no value mark "0.00".  Provide a description of the gift, bequest, or grant and purpose thereof:  24 Holy Bibles  City State, Zip (if different from above)	ONTACT PERSON FOR RECIPIENT DEPARTMENT OR OFF	ice:
Mailing Address (if different from above)  Email Address  Area Code & Telephone Number (if different from above)  ONOR OF GIFT, BEQUEST, OR GRANT:  Kenneth Copeland Ministries Name Beverly Huffman - IMCC, PO Box Oakdale, IA 52319  Mailing Address City, State, Zip Code  319-626-2391  Area Code & Telephone Number  Date of Gift, Bequest, or Grant Amount/Value*  "value is defined as "fair market value" of item as determined by receiving department or office. If no value mark "0.00".  Provide a description of the gift, bequest, or grant and purpose thereof:  24 Holy Bibles  Criteria to use this form:  Receipt of any gift, bequest, or grant that is received by any department of the state or received by the Governor on behalf of the state.		
Email Address  Area Code & Telephone Number (if different from above)  ONOR OF GIFT, BEQUEST, OR GRANT:  Kenneth Copeland Ministries  Name  Beverly Huffman - IMCC, PO Box Oakdale, IA 52319  Mailing Address City, State, Zip Code  319-626-2391  Area Code & Telephone Number  beverly, huffman@iowa.gov  Email Address (optional)  Provide a description of the gift, bequest, or grant and purpose thereof:  24 Holy Bibles  Criteria to use this form:  Receipt of any gift, bequest, or grant that is received by any department of the state or received by the Governor on behalf of the state.		
Area Code & Telephone Number (if different from above)  CONOR OF GIFT, BEQUEST, OR GRANT:  Kenneth Copeland Ministries  Name Beverly Huffman - IMCC, PO Box Oakdale, IA 52319  Mailing Address City, State, Zip Code  319-626-2391  Area Code & Telephone Number  beverly, huffman@iowa.gov  Finall Address (optional)  Provide a description of the gift, bequest, or grant and purpose thereof:  24 Holy Bibles  Criteria to use this form:  Receipt of any gift, bequest, or grant that is received by any department of the state or received by the Governor on behalf of the state.	<u> </u>	City, State, Zip (if different from above)
Kenneth Copeland Ministries  Name Beverly Huffman - IMCC, PO Box Oakdale, IA 52319  Mailing Address City, State, Zip Code  319-626-2391  Area Code & Telephone Number  beverly.huffman@iowa.gov  Finall Address (optional)  Provide a description of the gift, bequest, or grant and purpose thereof:  24 Holy Bibles  Criteria to use this form:  Receipt of any gift, bequest, or grant that is received by any department of the state or received by the Governor on behalf of the state.	Email Address	Area Code & Telephone Number (if different from the
Kenneth Copeland Ministries  Name Beverly Huffman - IMCC, PO Box Oakdale, IA 52319  Mailing Address City, State, Zip Code  319-626-2391  Area Code & Telephone Number  beverly huffman@iowa.gov  Email Address (optional)  Provide a description of the gift, bequest, or grant and purpose thereof:  24 Holy Bibles  Criteria to use this form:  Receipt of any gift, bequest, or grant that is received by any department of the state or received by the Governor on behalf of the state.	ONOR OF GIFT, BEQUEST, OR GRANT	(ii dilibidik ii din aboye)
Receipt of any gift, bequest, or grant that is received by any department of the state or received by the Governor on behalf of the state.	Name Beverly Huffman - IMCC, PO Box Oakdale, IA 52319 Mailing Address City, State, Zip Code 319-626-2391 Area Code & Telephone Number beverly.huffman@iowa.gov imail Address (optional)  Provide a description of the gift, bequest, or grant and purpose thereof:	Date of Gift, Bequest, or Grant Amount/Value*  *value is defined as "fair market value" of item as determined by receiving department or office. If no value mark "0.00".
tement of Affirmation:		of the state or received by the Governor on behalf of the state.
	ement of Affirmation:	

Sta

I. Larry Brimeyer affirm that the gift, bequest, or grant reported above is accurate. I further affirm that the information concerning the donor and assessment of the fair market value (if applicable) is correct and true to the best of my knowledge.

Revised 06/05 C 3 1111

# IOWA ETHICS AND CAMPAIGN DISCLOSURE BOARD 510 EAST 12<sup>TH</sup>, SUITE 1A DES MOINES, IA 50319

2010 APR 23 AM 10: 33

Fax: (515)281-4073 www.iowa.gov/ethics

Reset Form

Iowa Code section 8.7 requires all gifts, bequests, and grants given to any department of the state of lowa or received by the Governor on behalf of the state be reported to the lowa Ethics and Campaign Disclosure Board and the Government Oversight Committee. The Board will provide a copy of this report to the Government Oversight Committee. This form is required to be filed within 20 days of receipt of the gift, bequest, or grant.

### FORM-GBG

Gift, Bequest, or Grant information received by a department or accepted by the Governor on behalf of the state

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DEPARTMENT OR OFFICE RECEIVING THE GIFT, BEQUEST, C	OR GRANT:									
Iowa Medical & Classification Center										
Name of Department or Office PO Box A										
Mailing Address Oakdlae, IA 52319										
319-626-239)  Area Code & Telephone No.	y, otale, zip 000g									
ONTACT PERSON FOR RECIPIENT DEPARTMENT OR OFFICE										
Lowell Brandt										
Name										
Mailing Address (if different from above)	City, State, Zip (if different from above)									
Email Address	Area Code & Telephone Number (if different from above)									
ONOR OF GIFT, BEQUEST, OR GRANT:	toophone runner (if different from above)									
Kenneth Copeland Ministries  Name  Beverly Huffman - IMCC, PO Box Oakdale, IA 52319  Mailing Address City, State, Zip Code  319-626-2391  Area Code & Telephone Number  beverly.huffman@iowa.gov  Small Address (optional)  Provide a description of the gift, bequest, or grant and purpose thereof:  71 music CDs; 1 Bible; 500 calendars for use by off	January 2008 \$ 270.00  Date of Gift, Bequest, or Grant Amount/Value*  *value is defined as "fair market value" of item as determined by receiving department or office. If no value mark "0.00".  Genders in the prison chapel and on units									
Criteria to use this form: Receipt of any gift, bequest, or grant that is received by any department of t	the state or received by the Governor on behalf of the state.									
lement of Affirmation:										
STILL BETTE WENT affirm that the gift has										

### S

I, <u>Lorry Grime yer</u> affirm that the gift, bequest or grant reported above is accurate. I further affirm that the information concerning the donor and assessment of the fair market value (if applicable) is correct and true to the best of my knowledge.

4-22-08 Date

Revised 06/65THICS AND

## 10WA ETHICS AND CAMPAIGN DISCLOSURE BOARD 200 APR 23 APR 10: 33510 EAST 12TH, SUITE 1A DES MOINES, IA 50319

Fax: (515)281-4073 www.iowa.gov/ethics

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Gift, Bequest, or Grant information received by a department or accepted by the Governor on behalf of the state

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DEPARTMENT OR OFFICE RECEIVING	THE GIFT.	BEQUEST OR	CRANT
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Iowa Medical & Classification Center										
Name of Department or Office										
PO Box A Mailing Address	Oakdlae, IA 52319									
319-626-2391 Urly, State, Zip Code										
Area Code & Telephone No.										
ONTACT PERSON FOR RECIPIENT DEPARTMENT OR OFFIC	Æ:									
Lowell Brandi										
Vame										
Mailing Address (if different from above)	Chi Cin Tillian									
mail Address	City, State, Zip (if different from above)									
mail Audress	Area Code & Telephone Number (if different from above)									
NOR OF GIFT, BEQUEST, OR GRANT:	(10000)									
Kenneth Copeland Ministries  Geverly Huffman - IMCC, PO Box Oakdale, IA 52319  Geling Address City, State, Zip Code  319-626-2391  Gea Code & Telephone Number  Deverly.huffman@iowa.gov  Inail Address (optional)  Provide a description of the gift, bequest, or grant and purpose thereof:  I-VHS; 3 CDs; 1 Cassette Set for use by offenders	January 2008 \$50.00  Date of Gift, Bequest, or Grant Amount/Value*  "value is defined as "fair market value" of item as determined by receiving department or office. If no value mark "0.00".  in the prison chapel and on units									
riteria to use this form: eceipt of any gift, bequest, or grant that is received by any department of	f the state or received by the Governor on behalf of the state.									

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IA ETPRES AND A CALL.

# lowa Medical & Classification Center

PO Box A, Hwy 965, Oakdale, IA 52319

			50.00 1-VHS; 3-CDs; 1 Cassette set	270.00 71 music CDs- 1 Bible: Foo calculation	Bibles	Books	Books	59.00 Books, DVD set										
		Amount	\$ 50.00	\$ 270.00	\$ 240.00 Bibles	\$ 864.00 Books	\$ 150.00 Books	\$ 59.00								-	 	\$ 1.633.00
		Reason	Chapel - for offender use	Chapel - for offender use	Chapel - for offender use	Chapel - for offender use	Chapel - for offender use	Chapel - for offender use										Total Amount:
	Achiose	Beverly Hiffman Committee	Beverly Huffman Committee	Bearry Life Correctional Counselor	Benefit U. f	Bevery Hullman, Correctional Counselor	Benefit U. A.	Coverify nulliman, Correctional Counselor										
	Name	2008-Januar Kenneth Copeland Ministries	Private Donations (Anonymous)	Kenneth Copeland Ministries	2008-March Kenneth Copeland Ministries	Private Donations (Anonymore)	Private Donations (Anonymoris)											
į	Odic	2008-Januar			2008-March													

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